**REQUEST FOR PROPOSALS FOR PORTFOLIO VERIFICATION SERVICES**

**RFP #25-05**

**EXHIBIT D – GENERAL INFORMATION & CONTACT SHEET**

1. legal entity with whom the contract is to be written

|  |  |
| --- | --- |
| **Name** |  |
|  |
| Mailing address (primary office) |  |
| Phone number |  | Fax number |  |

|  |  |
| --- | --- |
| Mailing address (alternate office) |  |
| Phone number |  | Fax number |  |

1. Primary contact(s)

|  |  |
| --- | --- |
| **Name of Primary Contact, Title** |  |
| Mailing address |  |
| Phone number |  | Fax number |  | Email |  |

|  |  |
| --- | --- |
| **Name of Secondary Contact, Title** |  |
| Mailing address |  |
| Phone number |  | Fax number |  | Email |  |

1. principal officers

|  |  |
| --- | --- |
| **Name of Principal Officer #1** |  |
| Mailing address |  |
| Phone number |  | Fax number |  | Email |  |

|  |  |
| --- | --- |
| **Name of Principal Officer #2** |  |
| Mailing address |  |
| Phone number |  | Fax number |  | Email |  |

|  |  |
| --- | --- |
| **Name of Principal Officer #3** |  |
| Mailing address |  |
| Phone number |  | Fax number |  | Email |  |

|  |  |
| --- | --- |
| **Name of Principal Officer #4** |  |
| Mailing address |  |
| Phone number |  | Fax number |  | Email |  |

1. Legal FORM of organization

(e.g., sole proprietorship, partnership, corporation, etc.).

|  |  |
| --- | --- |
| Legal Form |  |

1. Identification/Certification Numbers

|  |  |
| --- | --- |
| Federal Employer Identification Number |  |
| Washington State Department of Revenue Registration Number (UBI Number) if Applicable |  |